

CHILD WELFARE AGENCY PUBLIC DISCLOSURE FORM

Date: December 30, 2013

Agency Name: Washoe County Department of Social Services

Agency Address: P.O. Box 11130

Date of written notification to the Division of Child and Family Services and Legislative

Auditor: December 30, 2013

Internal reference UNITY ID or Report Number: Report # 1609356; case # 1393163

Type of Report: ☒ 48 Hour Notice ☐ 15 Day Update ☐ 30 Day Update ☐ Final

☐ Child Fatality **Date of Death:**

☒ Near Fatality **Date of Near Fatality:** December 27, 2013

☐ Portions of information on this form have been withheld at the request of
law enforcement.

(Name of agency)

Information for Release:

A. Date of the notification to the child welfare agency of the death of a child:

Notification of the near fatality was received on 12/30/13.

B. Location of child at the time of death or near fatality (city/county):

Fallon, Nevada- Churchill County

C. A summary of the report of abuse or neglect and a factual description of the contents of the report:

Washoe County Department of Social Services received a report that an 8 month old child was transported from a local community hospital to the region's trauma hospital. The current medical team has concerns of non-accidental trauma to the infant. The child's prognosis is poor and he is not stable enough at this time to run additional tests on. The child is currently on full life support and the pupils are fixed and dilated. Reporter further indicated that information has been received that the child had been ill for several days prior to this incident.

D. The date of birth and gender of child:

April 25, 2013 – male child

E. The date that the child suffered the fatality or near fatality:

December 27, 2013

F. The cause of the fatality or near fatality, if such information has been determined:

The cause of the near fatality has yet to be determined by medical personnel.

- G. Whether the agency had any contact with the child or a member of the child's family or household before the fatality or near fatality and, if so:** (1) The frequency of any contact or communication with the child or a member of the child's family or household before the fatality or near fatality and the date on which the last contact or communication occurred before the fatality or near fatality;
- (2) Whether the agency which provides child welfare services provided any child welfare services to the child or to a member of the child's family or household before or at the time of the fatality or near fatality;
- (3) Whether the agency which provides child welfare services made any referrals for child welfare services for the child or for a member of the child's family or household before or at the time of the fatality or near fatality;
- (4) Whether the agency which provides child welfare services took any other actions concerning the welfare of the child before or at the time of the fatality or near fatality; and
- (5) A summary of the status of the child's case at the time of the fatality or near fatality, including, without limitation, whether the child's case was closed by the agency which provides child welfare services before the fatality or near fatality and, if so, the reasons that the case was closed.

There has been no prior contact with this family.

- H. Whether the agency which provides child welfare services, in response to the fatality or near fatality:** (1) Has provided or intends to provide child welfare services to the child or to a member of the child's family or household; and (2) Has made or intends to make a referral for child welfare services for the child or for a member of the child's family or household; and (3) Has taken or intends to take any other action concerning the welfare and safety of the child or any member of the child's family or household.

This fatality has been assigned for investigation by WCDSS and local law enforcement.
There are no other children in the home.

NON-DISCLOSURE NOTICE

The following information must not be released (see Policy on Public Disclosure of Child Fatality and Near Fatality Information, page 4): 1) Information regarding the sibling(s) of a deceased child; 2) the name of the reporting party or individual making an allegation or referral will not be released; 3) if the disclosure of the information would adversely affect any pending investigation concerning a report (NRS 432B.290(3)); 4) if the disclosure violates other federal or state law, including, but not limited to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Family Educational and Privacy Act of 1974 (FERPA), alcohol and drug abuse patient records (42 USC §290dd-2 and 42 CFR §212 (c)(6)), and any other applicable law.